

County: Door
 SCANDIA VILLAGE GOOD SAMARITAN
 290 SMITH DRIVE

Facility ID: 8640

Page 1

SISTER BAY 54234 Phone: (920) 854-2317
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 60
 Total Licensed Bed Capacity (12/31/01): 60
 Number of Residents on 12/31/01: 59

Ownership: Non-Profit Corporation
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? Yes
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 57

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	40.7
Supp. Home Care-Personal Care	No					1 - 4 Years	33.9
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.7	More Than 4 Years	25.4
Day Services	No	Mental Illness (Org./Psy)	54.2	65 - 74	6.8		-----
Respite Care	No	Mental Illness (Other)	5.1	75 - 84	37.3		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	44.1	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.2	Full-Time Equivalent	
Congregate Meals	No	Cancer	1.7		-----	Nursing Staff per 100 Residents	
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/01)	
Other Meals	No	Cardiovascular	5.1	65 & Over	98.3	-----	
Transportation	No	Cerebrovascular	10.2		-----	RNs	12.0
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	3.4
Other Services	Yes	Respiratory	8.5		-----	Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	15.3	Male	15.3	Aides, & Orderlies	
Mentally Ill	No		-----	Female	84.7		
Provide Day Programming for			100.0		-----		
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi - dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	6	100.0	236	30	90.9	100	0	0.0	0	17	85.0	132	0	0.0	0	0	0.0	0	53	89.8
Intermediate	---	---	---	3	9.1	83	0	0.0	0	3	15.0	128	0	0.0	0	0	0.0	0	6	10.2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		33	100.0		0	0.0		20	100.0		0	0.0		0	0.0		59	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	11.1	Daily Living (ADL)	Independent			
Private Home/With Home Health	4.9	Bathing	0.0	91.5	8.5	59
Other Nursing Homes	11.1	Dressing	6.8	86.4	6.8	59
Acute Care Hospitals	59.3	Transferring	23.7	66.1	10.2	59
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	8.5	83.1	8.5	59
Rehabilitation Hospitals	2.5	Eating	47.5	45.8	6.8	59
Other Locations	11.1	*****				
Total Number of Admissions	81	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		10.2
Private Home/No Home Health	26.3	Occ/Freq. Incontinent of Bladder	84.7	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	11.8	Occ/Freq. Incontinent of Bowel	15.3	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		0.0
Acute Care Hospitals	5.3	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		30.5
Rehabilitation Hospitals	1.3					
Other Locations	14.5	Skin Care		Other Resident Characteristics		
Deaths	40.8	With Pressure Sores	10.2	Have Advance Directives		93.2
Total Number of Discharges		With Rashes	10.2	Medications		
(Including Deaths)	76			Receiving Psychoactive Drugs		54.2

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.0	88.9	1.07	85.1	1.12	84.4	1.13	84.6	1.12
Current Residents from In-County	89.8	78.4	1.15	72.2	1.24	75.4	1.19	77.0	1.17
Admissions from In-County, Still Residing	27.2	25.3	1.07	20.8	1.30	22.1	1.23	20.8	1.31
Admissions/Average Daily Census	142.1	108.1	1.31	111.7	1.27	118.1	1.20	128.9	1.10
Discharges/Average Daily Census	133.3	107.3	1.24	112.2	1.19	118.3	1.13	130.0	1.03
Discharges To Private Residence/Average Daily Census	50.9	37.6	1.35	42.8	1.19	46.1	1.10	52.8	0.96
Residents Receiving Skilled Care	89.8	90.9	0.99	91.3	0.98	91.6	0.98	85.3	1.05
Residents Aged 65 and Older	98.3	96.2	1.02	93.6	1.05	94.2	1.04	87.5	1.12
Title 19 (Medicaid) Funded Residents	55.9	67.9	0.82	67.0	0.83	69.7	0.80	68.7	0.81
Private Pay Funded Residents	33.9	26.2	1.29	23.5	1.44	21.2	1.60	22.0	1.54
Developmentally Disabled Residents	0.0	0.5	0.00	0.9	0.00	0.8	0.00	7.6	0.00
Mentally Ill Residents	59.3	39.0	1.52	41.0	1.45	39.5	1.50	33.8	1.76
General Medical Service Residents	15.3	16.5	0.92	16.1	0.95	16.2	0.94	19.4	0.79
Impaired ADL (Mean)	46.1	49.9	0.92	48.7	0.95	48.5	0.95	49.3	0.94
Psychological Problems	54.2	48.3	1.12	50.2	1.08	50.0	1.09	51.9	1.05
Nursing Care Required (Mean)	7.6	7.0	1.08	7.3	1.05	7.0	1.08	7.3	1.04